

OKLAHOMA ABSTRACTORS BOARD

APPLICATION CHECKLIST Renewal of Certificate of Authority

NOTICE: Applicants are advised to carefully read and understand the Oklahoma Abstractors Act, Title1 of the Oklahoma Statutes, and the Oklahoma Administrative Code: Rules and Regulations Governing the Oklahoma Abstractors Board, Title 5.

WARNING: False statements on your application or accompanying documents, and/or non-compliance with the above rules, regulations and/or statutes are cause for revocation of Certificate of Authority and/or fines and penalties under the Rules.

WARNING: In order to process your application, **every item on this checklist must be included and completed**. Failure to comply with all requirements listed below could result in a delay of your renewal and/or a comprehensive on-site plant inspection.

WARNING: All renewal applications for Certificates of Authority shall, according to Title One, Section 30(B), be in the OAB office 90 days prior to expiration. If an application is not received in the OAB office by 5:00 p.m. on the 90th day prior to expiration, a \$100.00 fine shall be levied on the Certificate of Authority holder. If the application is not received in the OAB office by 5:00 p.m. on the 60th day prior to expiration, an additional \$300.00 fine shall be levied on the Certificate of Authority holder and the OAB agency office will notify the applicant that the application has not been received. If the application is not received in the OAB office by 5:00 p.m. on the 30th day prior to expiration, an additional \$500.00 fine will be levied in addition to the previous fines. All fines are cumulative and may be enforced in the same manner in which civil judgments may be enforced. This Policy is effective as of September 1, 2010.

- () **Completed Application.** Did you complete every question on the application form? If the question is not applicable, please put N/A. However, all blanks must be filled out.
- () Signed and Notarized. Is your application appropriately signed and notarized?
- () **Application Fee.** Did you enclose the proper fee amount for your Application for Renewal of Certificate of Authority?
- () OAB Rule 5:11-3-4. Application fees for permits, certificates of authority, and renewals

 For each calendar year a separate application and fee shall be submitted for each certificate of authority, permit, and renewal for each county in which the applicant desires to do business. The most recent census can be found on our website under "Forms". The fee shall be as follows:
 - (1) County Population of less than 10,000 \$400.00
 - (2) County Population of 10,000 but less than 30,000 \$800.00
 - (3) County Population of 30,000 but less than 60,000 \$1,200.00
 - (4) County Population of 60,000 but less than 100,000 \$1,600.00
 - (5) County Population of 100,000 but less than 200,000 \$2,400.00
 - (6) County Population of 200,000 or more \$3,200.00
- () **Proper Signature(s) and Payee.** Is your check properly signed? Is the payee shown as "Oklahoma Abstractors Board?"
- () Abstracting Rate Sheet. Complete either the page based fee schedule or time based fee schedule found in the

forms list on the website. Is proposed effective date at least 30 days beyond the date you expect our office to receive your application? If your rates are not changing, send in a clean copy of the rate sheet, not the copy previously approved by the Board.

- () Company Principles List. Did you include a list of all major (at least 10%) owners, stockholders, corporate officers and directors? If not incorporated, you must provide all company owners, officers and/or partners. The list must include the name, mailing address, e-mail address, percentage of stock, assets and shares owned by each, and phone numbers of each person listed. If you are incorporated, you must provide the name of an agent for service in the State of Oklahoma.
- () County Records Bond. If your Surety Bond has been renewed since your last Application for Renewal of Certificate of Authority and we have already processed it and sent it to your County Clerk, we need only a copy from your file. If you were recently issued a new county records bond or continuation certificate, you must enclose the ORIGINAL bond or continuation certificate that you received, so that we can process it and send a certified copy to your County Clerk and to you.
- () Errors and Omissions Insurance. Did you include a copy of the Declaration Page from your Errors and Omissions Insurance Policy?
- () Uniform Abstract Certificate. Does your Uniform Abstract Certificate comply with the prescribed format, and did you enclose a copy of it with this application?
- () **Final Title Report for the Issuance of Title Insurance.** Does your Final Title Report for the Issuance of Title Insurance comply with the prescribed format, and did you enclose a copy of it with this application?
- () **OESC Quarterly Report.** Did you enclose a copy of your <u>most recent</u> Oklahoma Employment Security Commission Quarterly Employee Contribution Report? You may mask out payroll amounts you are only required to show the listing of all company employees and the last four numbers of their Social Security number. Beginning January 1, 2011, the Oklahoma Employment Security Commission will require filing of Form OES-3 (Oklahoma Employers Quarterly Contribution Report) online. This information should be printed and sent in with your application.
- () Abstractor License Compliance. Did you include the job title and brief description for each employee on the OESC report? For those who are not licensed, and should be, did you supply their date of hire and when you anticipate scheduling a test? Note: The Rules and Regulations of the Oklahoma Abstractors Board provide:

OAB Rule5:11-3-1. Who must hold abstract license

- (a) Any person in the employ of a holder of a certificate of authority or permit, or a holder of a certificate of authority who is an individual actively engaged in the process of preparing abstracts, or the holder of a permit who is an individual actively engaged in the construction of an abstract plant, shall be required to have an individual abstract license.
- (b) Any person who is employed by a holder of a permit or certificate of authority whose sole function is limited to reviewing documents to determine the type of instrument, date, parties, recording information and legal description, and entering such information into a manual or computer indexing system shall not be required to hold an abstract license. Such activity shall be conducted under the supervision of a licensed abstractor. Prior to the final entry of such documents to the abstract plant, a licensed abstractor must review, verify and accept such entries as final on behalf of the holder of the permit or certificate of authority. Any matter entered into the indexing system by an unlicensed person without proper licensed supervision may be deemed a violation of this Act.
- (c) The holder of a certificate of authority or permit shall provide the Board with a list of the names of licensed and unlicensed employees in such form as directed by the Board.
- () Licensee Employment Changes. You are required to provide notice of change of any licensee's employment (both new hires and terminations) within 10 days of such event. If you failed to do so any time of the previous year, please take this opportunity to inform us of any changes in employment status for any of your licensees that have taken place in the last 12 months.

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OKLAHOMA ABSTRACTORS BOARD

421 NW 13th Street, Suite 180 Oklahoma City, OK 73103 Phone: (405) 522-5019 Fax: (405) 522-5503

APPLICATION FOR RENEWAL OF CERTIFICATE OF AUTHORITY

All information submitted will be a matter of public record.

Please return completed form, fee and required documentation to address above.

All questions must be answered completely. Send Application Fee and county records bond with this application. Make check payable to **Oklahoma Abstractors Board**. You must have a county records bond in each county that you are doing business.

In addition to the bond required, any person, firm, corporation, or other entity not engaged in business of abstracting on January 1, 1984, shall have for use in such business an independent set of abstract books or other system of indexes. These books or indexes must be compiled from the instruments of record affecting real estate in the office of the county clerk or the court clerk of said county where business is being conducted, but not copied from the indexes in said county office. These books or indexes shall show all instruments affecting title to real property on file or of record in the office of the county clerk and court clerk

All persons, firms, corporations, or other entities engaging in the business of abstracting shall have available for use an abstract plant and maintain same in "a current condition". To maintain "a current condition" is to have all documents or instruments indexed that are filed in said county, except those filed within the preceding fifteen (15) days. Failure to maintain "a current condition" will be grounds for revocation of the Certificate of Authority.

If your Certificate of Authority is allowed to lapse beyond renewal date, applicant is required to apply for a new Certificate of Authority.

In compliance with the Oklahoma Abstractors Act, I hereby make application to renew my existing Certificate of Authority and make the following statements under oath:

1.	Firm or Corporation Nar	ne			
	Business Street Address				
		Street	City	State	Zip
	Mailing Address				
	C	Street / P.O. Box	City	State	Zip
	E-mail Address		Company Website		
	Business Telephone ()	Business Fax ()		
	Certificate of Authority Lie	cense Number	Company TIN (if entity) or SSN (if i	ndividual):	

NOTE: IF CORPORATION, LIST NAMES AND ADDRESSES OF OFFICERS, PRINCIPAL STOCKHOLDERS AND DIRECTORS. IF PARTNERSHIP, LIST NAMES AND ADDRESSES OF ALL PARTNERS. (Attach as Exhibit)

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2.	Owner / Officer Name	
	Residence Address	Residence Phone () City / State / Zip
	Street	City / State / Zip
3.	State in which you are an actual resident of	or company is domesticated
4.	County in which you applied for a Certific	cate of Authority:
5.	Population of said county:	
6.	Do you have Errors and Omissions Insura	unce? []Yes []No
	If so, what is the name of the comp	pany?
	Policy No.	Amount of Insurance
	Amount of Deductible	Attach copy of E&O Insurance Declaration Page
7.	What county or counties have you held a	Certificate of Authority?
	How many years? Was Cer	tificate ever revoked? [] Yes [] No If so, when?
	Enclose a copy of your <i>Abstract Fees Sch</i> is application cannot be changed unless the	nedule NOTE: The abstracting and title services fee schedules submitted with the Board has been notified of said change.
9.		e the Uniform Abstract Certificate Form approved by the Board? opy of your Uniform Abstract Certificate Form.
	Does your abstract company currently usoard?	se the Final Title Report for the Issuance of Title Insurance Form approved by the
		opy of your Final Title Report for the Issuance of Title Insurance Form.
	. Have you or any principal been convicte this state, another state, or a federal court,	ed of or pleaded guilty or nolo contendere to a felony or crime of moral turpitude or are any charges pending?
		give complete details:
_		
12 nu	2. Are there any unpaid court judgments or imbers, dates and amounts	liens against you at this time? [] Yes [] No If so, give location of court, case
		tary Bankruptcy? [] Yes [] No Has an Involuntary Petition for Bankruptcy If yes to either question, please give details

14. Is your county records bond current?	[] Yes [] No Attach Copy	oj Bona	
Name of Bonding Company:			
Amount of Bond:	Expiration of I	3ond:	
15. Has there been any significant chang Certificate of Authority was issued? []			
16. Do you use the services of an outside operating your plant? Yes No		y vendor) to assi	st you in any way in maintaining or
If yes, give the name, address an	nd phone number of firm:		
I have carefully read the Oklahoma Abstr law and regulations. I further give conser Oklahoma Tax Commission, as required best of my knowledge and belief.	nt to the completion of a back	ground check by	an accredited company and the
Owner or Managing Officer/Partner Sig	gnature	Title	Date
STATE OF OKLAHOMA COUNTY OF)) SS:		
Subscribed and sworn before me this	/ day.of		,
Subscribed and sworn before the this	day 01		
	NOTAR	RY PUBLIC	
My Commission Expires:			
NOTE: FALSE STATEMENT I	IN THIS APPLICATION IS	CAUSE FOR	REVOCATION OF LICENSE
To be used by Oklahoma Abstractors Bo	ard only		
3. Proper Application Fee	[]Yes []No []Yes []No []Yes []No []Yes []No []Yes []No		
Remarks and questions:			
Date:	Reviewed by:		

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OAB SCHEDULE OF CERTIFICATE HOLDERS

COMPANY NAME:		COUNTY:		DATE:				
Please choose one of the sections (1-4) which best details your company and mark the box left of that section and then fill out all of the boxes in that section. Mark "N/A" if not applicable.								
1. SOLE PROPRIETORSHIP								
Please fill in the information below for each owner. Do not leave empty boxes, use "N/A" if not applicable.								
NAME OF OWNER(S)	% OF STOCK / % OF ASSETS / # SHARES	EMAIL ADDRESS	MAILING ADDRESS	PHONE NUMBER				
	%/%/							
	%/%/							
2. PARTNERSHIP	GENERAL	LIMITED	LIMITED LIABILITY					
Please fill in the information below for a ownership or a new application for Cert	each partner. Add a separate sheet if more s tificate of Authority.	pace is needed. Attach a copy of	the partnership papers that are applicab	ple to the type of partnership if	this is a transfer of			
NAME OF PARTNER(S)	% OF STOCK / % OF ASSETS / # SHARES	EMAIL ADDRESS	MAILING ADDRESS	PHONE NUMBER	TYPE OF PARTNER			
	%/%/							
	%/%/							
	%/%/							
3. CORPORATION	S – CORPORATION	C - CORPORAT	ION					
Please fill in the information below for a application for Certificate of Authority.	each Officer and Director. Add a separate sh	eet if more space is needed. Plea	se attach a copy of the Articles of Incorp	oration if this is a transfer of o	wnership or a new			
Name of Agent for Service of Process: Address where service is accepted:								
NAME OF OFFICER(S)	% OF STOCK / % OF ASSETS / # SHARES	EMAIL ADDRESS	MAILING ADDRESS	PHONE NUMBER	TITLE			
	%/%/							
	%/%/							
	%/%/							
NAME OF DIRECTOR(S)	% OF STOCK / % OF ASSETS / # SHARES	EMAIL ADDRESS	MAILING ADDRESS	PHONE NUMBER				
	%/%/							
	%/%/							
	%/%/							
4. LIMITED LIABILITY CO	OMPANY							
Please fill in the information below for e ownership or a new application for Cert	each Manager / Member. Add a separate sh tificate of Authority.	eet if more space is needed. Plea	se attach a copy of the LLC papers appoi	nting the Managers / Member	s if this is a transfer of			
Name of Agent for Service of Process: Address where service is accepted:								
NAME OF MANAGER(S) / MEMBER(S)	% OF STOCK / % OF ASSETS / # SHARES	EMAIL ADDRESS	MAILING ADDRESS	PHONE NUMBER	MANAGER OR MEMBER?			
	%/%/							
	%/%/							

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